



Data Points

RESULTS FROM THE 2008 CALIFORNIA WOMEN'S HEALTH SURVEY

Food security or ready access to enough food at all times, is a measure of true vulnerability and unmet need and is a useful tool to examine the real effects of poverty. Limited access to food is an obvious threat to health, and the food that people with low food security eat is often high in fat and low in nutrient value. It has been shown that people with a disability are more likely to live in poverty and thus more likely to face issues with food security.¹ Additionally, people with a disability often have poor health, both because poor health may be part of the disability and because disability is often associated with inactivity and obesity.^{1,2} A key goal of the Living Healthy with a Disability Program at the California Department of Public Health is to improve the health and quality of life of people with a disability. This report uses the California Women's Health Survey (CWHS) to examine the vulnerable population of women with a disability and explore whether those with poorer health are also those with the greatest level of food insecurity.

Women with a disability (WWD) were identified in the CWHS as those either limited in activities due to a physical, mental, or emotional problem, or those requiring the use of special equipment (e.g., as a cane, wheelchair, or special telephone) for a health problem. A validated set of six questions about food supply and monetary constraints during the previous year was used to categorize women as "food secure" or "food insecure."^{3,4} Four questions were used as indicators of health status:⁵ (1) General health: respondents ranked their

general health as excellent, very good, good, fair, or poor; (2) physical health: respondents reported the number of days in the previous month that their physical health was not good; (3) mental health: respondents reported the number of days in the previous month that their mental health was not good; and (4) activity restrictions: respondents reported the number of days in the previous month that their usual activities (e.g., self-care, work, or recreation) were restricted by poor health.

In these analyses, "poor health status" was defined as a response of fair or poor general health, reporting that either physical or mental health was not good in the previous month for 14 or more days, or that activity was restricted for 14 or more days. All others were classified as having "good health status" for each category. Responses were weighted in these analyses by age and race/ethnicity to reflect the 2000 California adult female population.

In 2008, 20.4 percent of respondents to the CWHS reported having a disability, and 35.0 percent of this group reported being food insecure compared to 22.8 percent of women without a disability.⁶

In each of the measures of health status, among women with a disability, those with poor health were more likely to be food insecure (see Figure 1).⁶

- WWD who ranked their general health status as poor were nearly twice as likely to be food insecure than those who ranked this measure as good

Food Security and Health Status Among California Women With a Disability, 2008

California Department of Public Health
Safe and Active Communities Branch
Living Healthy with a Disability Program

Public Health Message:

California women with a disability are more likely than those without a disability to have food insecurity. This is particularly true among those with a disability and with poor health, with one in two having limited access to food. When implementing public health policies and interventions, it is important to address food security by providing appropriate support, services, and accessible resources to this underserved and vulnerable population. Methods of doing this include promoting availability of accessible transportation to buy affordable groceries, making food delivery services available, and ensuring that public safety nets (e.g., food banks and food stamps) are useable by all women, including those with a disability.

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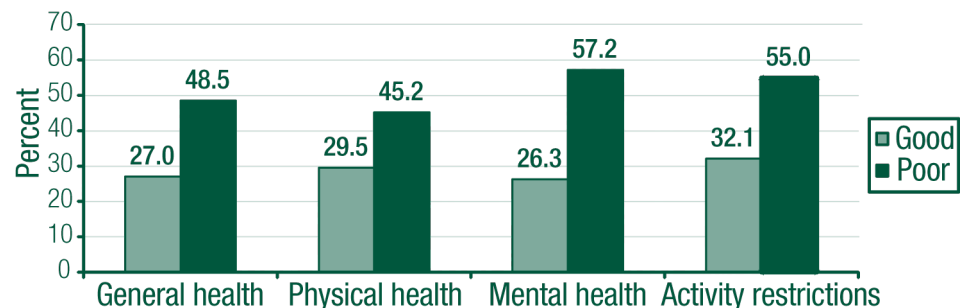
- (48.5 percent versus 27.0 percent).
- WWD who ranked their physical health as poor were 1.5 times more likely to be food insecure than those who ranked this measure as good (45.2 percent versus 29.5 percent).
- WWD who ranked their mental health as poor were more than twice as likely to be food insecure as those who ranked this measure as good (57.2 percent versus 26.3 percent).
- WWD who ranked their activity restrictions as poor were 1.7 times

more likely to be food insecure than those who ranked this measure as good (55.0 percent versus 32.1 percent).

Among women with a disability, the sickest women had the lowest level of food security. This represents an extremely fragile population, vulnerable to long-term chronic health problems often exacerbated by particular disabilities. The causal nature of the relationship between food security and health status in women with a disability is unclear, and further research needs to describe precisely the role food security plays in the lives of these women.

Figure 1

Food Insecurity by Health Status Among California Women with a Disability, 2008



Source: California Women's Health Survey, 2008

- 1 California Department of Public Health, SAC Branch, Living Healthy with a Disability Program. Disability in California, Summer 2009.
- 2 Disability and Health State Chartbook - 2006: Profiles of Health for Adults with Disabilities. Atlanta, GA: Dept of Health and Human Services, Centers for Disease Control and Prevention; 2009. <http://www.cdc.gov/ncbddd/dh/chartbook/default.htm>
- 3 *Food Security in the United States: Measuring Household Food Security*. US Department of Agriculture, Economic Research Service; 2008. <http://www.ers.usda.gov/Briefing/FoodSecurity/measurement.htm>.

*Food Security and Health
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- 4 *U.S. Household Food Security Module: Six-Item Short Form*. US Department of Agriculture; 2008. <http://www.ers.usda.gov/Briefing/foodsecurity/surveytools/short2008.pdf>.
- 5 National Center for Chronic Disease Prevention and Health Promotion. *Health-Related Quality of Life*. Atlanta, GA: Dept of Health and Human Services, Centers for Disease Control and Prevention; 2009. <http://www.cdc.gov/hrqol/>.
- 6 All $P < .0001$.

Submitted by: Julie Cross Riedel, Ph.D. and Nancy Guenther, M.S.T., California
Department of Public Health, Safe and Active Communities Branch, Living Healthy with a
Disability Program, (916) 552-9851, julie.crossriedel@cdph.ca.gov